PTO/SB/07 (08-03)
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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number 10/603,441

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 1-24-05 Indep	Depend	AFTER FIRST AMENDMENT Indep	Depend	AFTER SECOND AMENDMENT Indep	Depend
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
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18		1				
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22		1				
23		1				
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34		1				
35		1				
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45		1				
46		1				
47		1				
48		1				
49		1				
50		1				
Total Indep						
Total Depend						
Total Claims						

CLAIMS	1-24-05 Indep	Depend	Indep	Depend	Indep	Depend
51		1				
52		1				
53		1				
54		1				
55		1				
56		1				
57		1				
58		1				
59		1				
60		1				
61		1				
62						
63		1				
64		1				
65		1				
66		1				
67		1				
68		1				
69		1				
70		1				
71		1				
72		1				
73		1				
74		1				
75	1					
76		1				
77		1				
78		1				
79		1				
80	1					
81		1				
82		1				
83		1				
84		1				
85		1				
86		1				
87		1				
88		1				
89		1				
90		1				
91		1				
92		1				
93		1				
94	1					
95		1				
96		1				
97		1				
98		1				
99		1				
100		1				
Total Indep						
Total Depend						
Total Claims						

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/603,441

FILING DATE

APPLICANT(S)

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CLAIMS

	AS FILED 1-24-05		AFTER 1st Amendment		AFTER 2nd Amendment			AS FILED 1-24-05		AFTER 1st Amendment		AFTER 2nd Amendment	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1					151		1				
102		1					152		1				
103		1					153		1				
104		1					154		1				
105		1					155		1				
106		1					156		1				
107		1					157	1					
108		1					158		1				
109		1					159		1				
110		1					160		1				
111		1					161		1				
112							162		1				
113							163		1				
114							164		1				
115							165		1				
116							166		1				
117							167		1				
118		1					168		1				
119		1					169		1				
120		1					170		1				
121		1					171	1					
122		1					172		1				
123		1					173		1				
124		1					174		1				
125		1					175		1				
126							176		1				
127							177		1				
128							178		1				
129							179		1				
130							180		1				
131		1					181		1				
132		1					182		1				
133		1					183		1				
134		1					184	1					
135	1						185		1				
136		1					186		1				
137		1					187	1					
138		1					188		1				
139		1					189		1				
140		1					190		1				
141		1					191	1					
142		1					192		1				
143							193		1				
144							194		1				
145		1					195		1				
146		1					196		1				
147		1					197		1				
148		1					198		1				
149		1					199	1					
150		1					200		1				
TOTAL IND.		↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS							TOTAL CLAIMS						

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number: 10/603 441

Filing Date:

Applicant(s):

May be used for additional claims or amendments

CLAIMS	AS FILED 1-24-05 Indep	AS FILED 1-24-05 Depend	AFTER FIRST AMENDMENT Indep	AFTER FIRST AMENDMENT Depend	AFTER SECOND AMENDMENT Indep	AFTER SECOND AMENDMENT Depend
20 1		1				
20 2		1				
20 3		1				
20 4						
20 5		1				
20 6						
20 7		1				
20 8						
20 9		1				
2 10						
2 11		1				
2 12						
2 13						
2 14						
2 15	1					
2 16		1				
2 17		1				
2 18		1				
2 19		1				
2 20		1				
2 21		1				
2 22		1				
2 23		1				
2 24		1				
2 25		1				
2 26		1				
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2 43						
2 44						
2 45						
2 46						
2 47						
2 48						
2 49						
2 50						
Total Indep	12					
Total Depend	188					
Total Claims	200					

CLAIMS	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
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61						
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95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						